

Memorial Hospital Lafayette County 'MHLC'  
November 28, 2017  
MHLC Conference Room

**Present:** MHLC County Chair Jack Sauer; Supervisors Larry Ludlum; Bev Anderson; Gerald Heimann; Bob Boyle; Jack Wiegel; Homer Evenstad; Carol Corn; Matt Solverson, MD; COO Kathy Kuepers; MHLC Finance Manager Molly Wiegel; CNO Terri Vieth; Executive Secretary Jody Tuescher; RJ Reporter.

**Absent:** Administrator Julie Chikowski

**I. Call to Order**

Chairman Sauer called the meeting to order at 7:00 a.m.

**II. Posting**

Mr. Sauer asked if the meeting had been properly posted. Ms. Tuescher reported that the meeting had been posted with notices at the Hospital, Health Department, Manor, Court House, County Website, and sent to the local media. Mr. Sauer declared the meeting legal.

**III. Approval of Agenda - Discussion and possible action requested**

Mr. Sauer presented the agenda and inquired if there were any changes. Mr. Boyle made the motion to approve the agenda, seconded by Ms. Anderson. Voice vote, motion passed.

**IV. Minutes – Discussion and action requested.**

Motion by Mr. Ludlum, seconded by Mr. Wiegel to approve minutes from the meeting of October 24, 2017, voice vote, motion passed.

**V. Financials – Discussion and possible action requested**

1. October 2017 Hospital Financial Summary – Ms. Wiegel presented the financial report.

Income Statement Year to Date

- We are at a gain of 150,552, which is 179% of budget, budget is loss of \$191,042
- Net revenue from services are \$15,185,905, which is 8% over budget, budget is \$14,122,653
- Total expenses are \$15,051,603, which is 5% over budget, budget is \$14,306,769

Balance Sheet Year to Date

- Cash is at \$653,370 down 648,096 from September
- Account receivable
  - Hospital - \$6,164,361
  - Clinic - \$ 529,357

Stats Year to Date

- Total joints – 42, up 15 from 2016
- Observation hours – 4,049, up 957 from 2016
- Swing bed days – 513, down 151 from 2016
- Acute bed days – 304, down 172 from 2016

Primary Care Clinics Summary Year to Date

- Visits – 17,987; with 1,782 in current month
- Total gross charges is \$4,913,658, which is 226% over budget, budget is \$1,509,525; after factoring in allowances of 47.14% net revenue is \$2,597,302
- Total expense is \$2,032,774, which is 24% over budget, budget is \$1,642,191
- Total gain before allowances is \$2,880,885; total gain after factoring in allowances is \$564,529

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- Current account receivable is at \$529,357

Loan Summary as of 11/27/2017

- Clinic Loan of \$1,300,000
  - \$140,147 left
- Epic Loan of \$1,400,000
  - \$670,270.66 left

After general discussion and clarifications Mr. Wiegel made the motion to approve the financial report, seconded by Ms. Anderson to approve, voice vote, motion passed.

2. Budget Review:

2018 Packet was reviewed and questions answered regarding increases and other changes made that were approved at County Board.

**VI. Audit of the Bills - Discussion and possible action requested.**

Ms. Wiegel reviewed and highlighted items and answered questions that needed clarification. After a general discussion, Mr. Ludlum made the motion, seconded by Mr. Boyle to pay the bills as presented. Voice vote, motion passed.

**VII. Personnel – Discussion and possible action requested.**

1. Staff Updates – Ms. Kuepers, COO/Terri Vieth, CNO:

- Fulltime RN resigned – posted internally as a refill
- Diane Bredeson, registration took the coding position in HIM– we will be refilling that position and are interviewing next week
- We hired a housekeeper
- We are interviewing for a Fulltime CNA position
- We are interviewing for an OR RN position
- With the addition of several new providers, we are 3 CMA's short to support their needs - so we continue to interview - but we are struggling to get qualified applicants – we need staff to be able to do phlebotomy and have experience – this is a requirement of RHC Status. General discussion continued. We need to look at other options to fill this need and we may be coming back to look at another level of support staff – LPN or RN's.
- The new RN Manager at the Clinic is working out well – she is an asset to the clinic
- We hired a nurse triage position – this is someone who can fill meds and call results which again – adding more providers is getting to be a busy job.
- HIM Clerk position has not been filled – with the implementation of EPIC, transcription has gone away- we have 2 transcriptionists and one is retiring as of Jan 2. We can utilize the 2 remaining staff for scanning and other HIM Clerk duties but would like to combine the other two positions and change it to be one experienced Coding position. Ms. Wiegel put numbers together in a packet to show the comparisons - by doing this it would work out to be a cost savings of \$41,000 including benefits – in addition, by adding an experienced Coding position we would be able to capture more revenue and see a decrease in AR. After review of the summary, clarifications and general discussion, Mr. Ludlum made the motion, seconded by Mr. Wiegel to approve combining the two full time positions into one fulltime Coder position and send it onto HR/Finance Committee on 12/6/17 and County Board 12/12/17 for their approval. Voice vote, motion passed.

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2. MHLC CFO/Director of Finance history as well as wage survey

Ms. Kuepers: For informational purposes shared the history of the CFO position at the hospital. Originally, when Administrator Don Easley retired in 1998 and the new Administrator Sherry Kudronowicz reorganized – they never had a CFO prior to that – they had a Business Office Manager. Joel Gehling was named the first CFO here and then Dave Meister and then Marie Wamsley. So it is not a new position - it is an existing position that has not been refilled. We just wanted to clear the air because there has been some miscommunication and confusion about that.

Also on the wage survey, we actually participate annually in two wage surveys, the WHA Wage Survey & the Rural Wisconsin Health Cooperative Wage Survey. The WHA Wage Survey is an annual survey for administrative level positions. The Rural Wisconsin Hospital Cooperative Wage Survey – is a survey where 40 rural acute care hospitals throughout the state including all of our competitors, participate. So we have a wage range – the low and the high range for each position. We usually are asking for wages that are on the lower end just to be in the range and to be competitive. We just wanted everyone to be aware, when we are proposing wages this is where we are pulling the numbers. General discussion continued.

Dr. Solverson wanted to remind everyone that when talking about wages that any clinical staff that does direct patient care - 60¢ of every dollar is covered by the Federal Government and money brought into the community. So when you talk wage increase and cost to the County – it would be 40¢ on the dollar. Brief discussion continued.

Mr. Ludlum asked that if they intend to bring this request in the future it be a closed session.

**VIII. Medical Staff Report - Discussion and possible action requested.**

1. Appointments:

None at this time.

Dr. Solverson reported that things are going very well with the providers and EPIC training. Working through challenges with scheduling to make sure patient quality of care continues to be a priority.

**IX. Management Report - Discussion and possible action requested.**

Old Business:

1. RHC Clinic Update: Ms. Kuepers

We are moving along - Ms. Wiegel got the last piece for the application for the survey – we expect to be surveyed sometime in February.

Signage:

We received bids from Lange and Signs to Go – Signs to Go came in higher – RBS was not able to bid this type of sign. Ms. Chikowski went back to Lange and asked them to sharpen their pencils and they came back with approximately \$3,000 less than what they had originally bid. The Illuminated sign went from \$8,448 to \$5,546 – they did very well. The sign not illuminated went from \$5,562 to \$2,774. Ms. Kuepers proposed to the committee that since we have evening clinics in Darlington – we do the illuminated sign in Darlington and the non-Illuminated sign in Shullsburg for a total cost of \$8,332. After a brief discussion the motion was made by Mr. Wiegel, seconded by Mr. Boyle to approve this request. Voice vote, motion passed.

2. EPIC Update:

Ms. Kuepers reported that the transition is going well. We are dropping bills and continue to meet with the EPIC & Unity Point teams – they are great people to work with.

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3. Argyle Clinic:

Ms. Kuepers: We had Backyard LTD look at the basement and he recommended that we have Badger Basement do the work. Ms. Chikowski called Mr. Sauer to report this and gave the go ahead. A general discussion of issues - updates in codes as well as RHC Status, and the need to fix the water issues regardless of whether we sell or update the building the floor needs to be taken care of. Mr. Wiegel motioned to go ahead, fix the basement floor, and hire Badger Basement to do the work, seconded by Mr. Ludlum. Voice vote, motion passed with Mr. Boyle and Mr. Evenstad voting no.

4. Dialysis Space

Ms. Kuepers: As we have discussed before with all of the growth in our specialty clinic volume we are in need of more clinic space – we look to remodel the Dialysis space into additional specialty/outpatient clinic area. We received and reviewed the bid from Miron for \$249,000 and would like to send it onto HR/Finance on the 12/6/17 for their approval. The timeline is the sooner the better – if we send the plans to the state-it takes 45 – 60 days to get approval. We have \$245,000 in our own cash – Capital Budget Fund. After a brief discussion and other clarifications, Ms. Anderson motioned, seconded by Mr. Boyle to send the bid from Miron onto the other committees for approval. Voice vote, motion passed.

New Business:

1. IT Requests:

None at the time.

**X. Set Next Meeting Date** – Mr. Sauer set the next meeting for:

**Next Hospital Committee Meeting  
December 21, 2017 at 7 a.m.**

**XI. Adjournment** – Mr. Boyle made a motion, seconded by Ms. Anderson to adjourn the meeting. Voice vote, meeting was adjourned.